# L20 000 a a 3 9 9 3

(Requestor's Name)
(Address)
(Address)
<b>,</b>
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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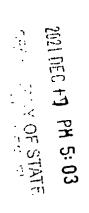
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A. RIVERS
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2021 DEC 17 AM 7: 42

Letter Number: 821A00029609

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 9, 2021

STEPHEN PINEDA 2937 SW 156TH AVE. MIAMI, FL 33185

SUBJECT: LOBSTER MOBSTER LLC

Ref. Number: L20000223933

We have received your document for LOBSTER MOBSTER LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers Regulatory Specialist II

www.sunbiz.org

## COVER LETTER

Registration Section

TO:

on of Cor	porations				
LOBSTER MOBSTER LLC					
Name of Limited Liability Company					
rticles of .	Amendment and fee(s) are sub	mitted for filing.			
correspo	ndence concerning this matter	to the following:			
	Stephen Pineda				
		Name of Person			
		Firm-Company			
	2937 SW 156th Avenue				
		Address			
	Miami, FL 33185				
	stenhen@steliaine.com	City/State and Zip Code			
		to be used for future annual repo	rt notification)		
rmation co	oncerning this matter, please ca	all;			
	305 431-3242				
Name of Person		Area Code 1	Daytime Telephone Number		
eck for th	e following amount:				
ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed	☐ \$60.00 Filing Fee, Certificate of Status Certified Copy radditional copy is enclos		
Mailing Address: Registration Section		Street Address: Registration Section			
Division of Corporations		Division of Corporations			
			of Tallahassee onroe Street, Suite 810		
	rticles of a corresponding fee Mame of Caresponding fee Mame of Carespo	Name of Lim  rticles of Amendment and fee(s) are sub l correspondence concerning this matter  Stephen Pineda  2937 SW 156th Avenue  Miami, FL 33185  stephen@ steliainc.com  E-mail address: ( rmation concerning this matter, please can be a second stellar of Status)  Name of Person  reck for the following amount:  ng Fee	Particles of Amendment and fee(s) are submitted for filing.  It correspondence concerning this matter to the following:    Stephen Pineda		

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lobster Mobster LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{7/28/2020}{2}$ and assigned Florida document number  $\underline{1.20000223933}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Meta3 LLC the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 2937 SW 156th Avenue Enter new principal offices address, if applicable: Miami, FL 33185 (Principal office address MUST BE A STREET ADDRESS) 2937 SW 156th Avenue Enter new mailing address, if applicable: Miami, FL 33185 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here: Stephen Pineda Name of New Registered Agent: 2937 SW 156th Avenue New Registered Office Address: Enter Florida street address Miami

#### New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Stephen Pineda	2937 SW 156th Avenue	
		Miami, FL 33185	□Remove
		<del></del>	□Change
MGR	Ocean Breeze Holdings Inc.	11400 SW 102 Court	□Add
		Miami, FL 33176	=Remove
			□Change
MGR	Stelia Inc.	2937 SW 156th Avenue	□Add
		Miami, FL 33185	<b>≡</b> Remove
			□Change
			□Remove
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Effective date, if other If an effective date is listed,	r than the date of filin the date must be specific an	ig: id cannot be prior to da	(opti te of filing or more than 90 days afte	<b>onal)</b> r tiling.) Pursuant to 605.0207 (1
Note: If the date inserte	d in this block does not	meet the applicable:	statutory filing requirements, th	is date will not be listed as th
document's effective da	te on the Department of	State's records.		
e record specifies a delay rd is filed.	red effective date, but no	it an effective time, a	at 12:01 a.m. on the earlier of: (I	5) The 90th day after the
November 4 Dated		2021		
//	$\overline{}$	••		
5	Ton			
	Signature of a	member or authorized	representative of a member	

Typed or printed name of signee